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2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
INVENTOR'S NAME	
Street Address	
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Street Address	
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<input type="checkbox"/> Check if additional changes are enclosed.	

1. CORRESPONDENCE ADDRESS
<p>CHRISTINE E CARTY PATENT DEPT MERCK AND CO INC P O BOX 2000 RAHWAY NJ 07065-0907</p>

RECEIVED
JAN 20 1998
07

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/409,122	03/22/95	011	SALIMI, A	1815 10/15/97
First Named Applicant JOYCE, JOSEPH G.				

TITLE OF INVENTION: RECOMBINANT HUMAN PAPILLOMAVIRUS TYPE 18 VACCINE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1 19425	424-204.100	T10	UTILITY	NO	\$1320.00	01/15/98

3. Correspondence address change (Complete only if there is a change)

02/03/1998 LBERGER 00000214 DRI:132755 08409122
01 FC:142 1320.00 CH

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1. Joanne M. Giesser
2. Jack L. Tribble
3.

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE MERCK & CO., INC.
(2) ADDRESS: (CITY & STATE OR COUNTRY) RAHWAY, NEW JERSEY

A. ☐ This application is NOT assigned.
☐ Assignment previously submitted to the Patent and Trademark Office.
☒ Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS.

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6a. The following fees are enclosed: <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies	
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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.	
(Authorized Signature) Joanne M. Giesser	(Date) 1/13/98

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Assistant Commissioner for Patents
Washington, D.C. 20231

on: January 13, 1998 (Date)
Joanne M. Giesser (Name of person making deposit)
Joanne M. Giesser (Signature)
Jan 13, 1998 (Date)